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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF TENNESSEE	_	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Peggy First name Annette	First name
	Bring your picture	Middle name	Middle name
	identification to your meeting with the trustee.	Willbanks Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	FKA Peggy Annette Spangler	
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3448	

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		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINS			
5.	Where you live	1987 Shellmound Road	If Debtor 2 lives at a different address:			
		Jasper, TN 37347 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Marion				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing	Check one:	Check one:			
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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7.	The chapter of the Bankruptcy Code you are choosing to file under			rief description of each, see go to the top of page 1 and			.C. § 342(b) for Individu	uals Filing for Bankruptcy
	choosing to the under	☐ Chap	ter 7					
		☐ Chap	ter 11					
		☐ Chap	ter 12					
		■ Chap	ter 13					
В.	How you will pay the fee	ab ord	out how yo	entire fee when I file my p u may pay. Typically, if you a attorney is submitting your p address.	are paying	the fee yourself,	you may pay with cash	n, cashier's check, or money
				the fee in installments. If		e this option, sign	and attach the Applica	ation for Individuals to Pay
			•	e in Installments (Official For t my fee be waived (You m	,	this option only i	f you are filing for Char	oter 7. Ry law, a judge may
		bu ap	t is not required	uired to, waive your fee, and ur family size and you are un on to Have the Chapter 7 Fili	may do so able to pa	o only if your inco y the fee in install	me is less than 150% of ments). If you choose	of the official poverty line that this option, you must fill out
).	Have you filed for	□ No.						
	bankruptcy within the last 8 years?	Yes.						
	•			TNEBKE Ch. 13				
			District	Dismissed 10/25/19	When	5/29/19	Case number	19-12215 NWW
			District		When		Case number	
			District		When		Case number	
0.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor				Relationship to y	ou
			District		When		Case number, if	known
			Debtor				Relationship to y	/ou
			District		When		Case number, if	known
 I1.	Do you rent your residence?	■ No.	Go to li	ne 12.				
	i condende :	☐ Yes.	Has yo	ur landlord obtained an evic	tion judgm	ent against you?		
				No. Go to line 12.				
				Yes. Fill out Initial Statemer	nt Δhout ar	Eviction Judame	ent Against You (Form	101A) and file it as part of

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ar	Report About Any Bu	sinesses `	You Owr	as a Sole Proprietor			
2.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of business			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, State & ZIP Code			
	it to this petition.		Chec	k the appropriate box to describe your business:			
				Health Care Business (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as defined in 11 U.S.C. § 101(53A))			
				Commodity Broker (as defined in 11 U.S.C. § 101(6))			
				None of the above			
3.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	s. If you ir s, cash-fl	illing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of a cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure 1116(1)(B).			
		■ No.	I am r	not filing under Chapter 11.			
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code	iling under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am f	iling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
ar	t 4: Report if You Own or	Have Any	Hazardo	ous Property or Any Property That Needs Immediate Attention			
4.	Do you own or have any	■ No.			_		
	property that poses or is						
	alleged to pose a threat of imminent and	☐ Yes.	What is	the hazard?			
	identifiable hazard to public health or safety?						
	Or do you own any property that needs immediate attention?			diate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?			
				Number, Street, City, State & Zip Code	_		

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Debtor 1 **Peggy Annette Willbanks**

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

	capa	

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Main Document Debtor 1 Peggy Annette Willbanks

Par	t 6: Answer These Quest	ions for Rep	orting Purposes							
16.	What kind of debts do you have?	ir	re your debts primarily consundividual primarily for a personal No. Go to line 16b.	imer debts? Consumer debts are defined, family, or household purpose."	ed in 11 U.S.C. § 101(8) as "incurred by an					
		_	Yes. Go to line 17.							
		16b. A								
			☐ No. Go to line 16c.	- ,						
			Yes. Go to line 17.							
		16c. S	state the type of debts you owe to	hat are not consumer debts or business	debts					
17.	Are you filing under Chapter 7?	■ No.	No. I am not filing under Chapter 7. Go to line 18.							
	Do you estimate that after any exempt property is excluded and	а	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?							
	administrative expenses are paid that funds will		□No							
	be available for distribution to unsecured creditors?	Γ	☐ Yes							
18.	How many Creditors do	1 -49		1 ,000-5,000	2 5,001-50,000					
	you estimate that you owe?	□ 50-99		□ 5001-10,000 □ 10,001,05,000	□ 50,001-100,000					
		☐ 100-199 ☐ 200-999		□ 10,001-25,000	☐ More than100,000					
19.	How much do you estimate your assets to be worth?		,000 - \$100,000 1 - \$500,000	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion					
		□ \$500,00	1 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion					
20.	How much do you estimate your liabilities to be?	□ \$100,00	,000 - \$100,000 - \$500,000 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion					
		— \$500,00	1 - \$1 HIIIIOH							
Par	17: Sign Below									
For	you	I have exar	nined this petition, and I declare	under penalty of perjury that the information	ation provided is true and correct.					
				m aware that I may proceed, if eligible, u available under each chapter, and I cho						
				ay or agree to pay someone who is not tice required by 11 U.S.C. § 342(b).	an attorney to help me fill out this					
		I request re	lief in accordance with the chapt	ter of title 11, United States Code, speci-	fied in this petition.					
				cealing property, or obtaining money or 250,000, or imprisonment for up to 20 ye	property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519,					
			Annette Willbanks Inette Willbanks of Debtor 1	Signature of Debtor 2	2					
		Executed o	November 13, 2019	Executed on	DD / YYYY					
			, 55/1111	IVIIVI /	,					

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Debtor 1 **Peggy Annette Willbanks**

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ W. Thomas Bible, Jr.	Date	November 13, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
W. Thomas Bible, Jr. 014754 Printed name		
Tom Bible Law		
Firm name		
6918 Shallowford Road, Suite 100		
Chattanooga, TN 37421		
Number, Street, City, State & ZIP Code		
Contact phone (423)424-3116	Email address	tom@tombiblelaw.com or melinda@tombiblelaw.com
014754 TN		
Bar number & State		

Fill in this information to identify your case: Debtor 1 Peggy Annette Willbanks First Name Middle Name Last Name Debtor 2 (Spouse if, filling) First Name Middle Name Last Name	
First Name Middle Name Last Name Debtor 2	
Debtor 2	
(Spouse if, filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: EASTERN DISTRICT OF TENNESSEE	
Case number	
(if known)	Check if this is an
an	amended filing
Official Forms 407	
Official Form 107 Statement of Financial Affaire for Individuals Filing for Bonksunton	
Statement of Financial Affairs for Individuals Filing for Bankruptcy	4/1
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for suppinformation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your	
number (if known). Answer every question.	
Part 1: Give Details About Your Marital Status and Where You Lived Before	
What is your current marital status?	
□ Married	
■ Not married	
2. During the last 3 years, have you lived anywhere other than where you live now?	
□ No	
Yes. List all of the places you lived in the last 3 years. Do not include where you live now.	
Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: lived there	Dates Debtor 2 lived there
1987 Shellmound Road From-To: Same as Debtor 1	☐ Same as Debtor 1
Jasper, TN 37347 January 2016 - January 2019	From-To:
155 Honey Hollow Trail From-To: Same as Debtor 1	
155 Honey Hollow Trail From-To: ☐ Same as Debtor 1 Jasper, TN 37347 January 2019 -	☐ Same as Debtor 1 From-To:
September 2019	
3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wi	
otatos ana tormonos motatos vinesma, otamornia, idano, estadata, ritoriada, ritoriada, ritoriado, r	vioconomi,
■ No	
Yes. Make sure you fill out <i>Schedule H: Your Codebtors</i> (Official Form 106H).	
Part 2 Explain the Sources of Your Income	
4. Did you have any income from employment or from operating a business during this year or the two previous calendary in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.	ndar years?
Debtor 1 Debtor 2	
Sources of income Check all that apply. Check all that apply. Gross income (before deductions and exclusions) Check all that apply.	Gross income (before deductions and exclusions)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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					Debtor 1			Debtor 2		
					Sources of income Check all that apply.	(bet	oss income fore deductions and lusions)		of income that apply.	Gross income (before deductions and exclusions)
			1 of currei ed for bar	nt year until kruptcy:	■ Wages, commissions, bonuses, tips		\$18,855.00	☐ Wages bonuses, t	, commissions, tips	
					☐ Operating a business			☐ Operat	ing a business	
	or last cal anuary 1		ar year: December	31, 2018)	■ Wages, commissions, bonuses, tips		\$4,000.00	☐ Wages bonuses, t	, commissions, tips	
					☐ Operating a business			☐ Operat	ing a business	
			ar year be December		■ Wages, commissions, bonuses, tips		\$3,000.00	☐ Wages bonuses, t	, commissions, tips	
					☐ Operating a business			☐ Operat	ing a business	
	List ead	ch so		he gross inco	e and you have income that me from each source separa			•		
					Debtor 1			Debtor 2		
					Sources of income Describe below.	eac (bet	ess income from th source fore deductions and lusions)		of income pelow.	Gross income (before deductions and exclusions)
Pa	rt 3:	_ist (Certain Pa	yments You	Made Before You Filed for	Bankrı	uptcy			
6.	Are eitl □ No	ο.	Neither Deindividual puring the No.	ebtor 1 nor D primarily for a 90 days befo Go to line 7 List below e paid that cre not include	s debts primarily consume ebtor 2 has primarily consequences personal, family, or househouse you filed for bankruptcy, or each creditor to whom you pareditor. Do not include payments to an attorney for on 4/01/22 and every 3 years.	sumer dold purp did you p aid a tota ents for a this ban	ebts. Consumer debtose." pay any creditor a total al of \$6,825* or more domestic support obligations.	al of \$6,825* of in one or mor gations, such	or more? re payments and to as child support a	he total amount you and alimony. Also, do
	■ Ye				r both have primarily cons re you filed for bankruptcy, c			al of \$600 or r	nore?	
			■ No.	Go to line 7						
			□ Yes	include pay	each creditor to whom you pa ments for domestic support of this bankruptcy case.					
	Credit	or's	Name and	I Address	Dates of payme	ent	Total amount paid	Amount y		payment for

Case 1:19-bk-14827-SDR Doc 1 Filed 11/13/19 Entered 11/13/19 14:35:55 Main Document Page 10 of 54 Debtor 1 **Peggy Annette Willbanks** Case number (if known) Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No ☐ Yes. List all payments to an insider. **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment paid still owe Include creditor's name Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. П Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Damage Leigh A Goebel vs. Peggy A **Hamilton County Circuit** □ Pending Willbanks Complaint/Car Court □ On appeal 19C496 Accident 625 Georgia Ave. Room 500 □ Concluded Chattanooga, TN 37402 Within 1 year before you filed for bankruptou

Check all that apply and fill in the details below.	
Chook an that apply and his the detaile below.	

No. Go to line 11.

Yes. Fill in the information below.

Creditor Name and Address Describe the Property Date Value of the property **Explain what happened**

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

Yes. Fill in the details.

Creditor Name and Address Describe the action the creditor took Date action was Amount taken

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

Nο

Yes

Pa	rt 5: List Certain Gifts and Contributions									
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No ■ Yes. Fill in the details for each gift.									
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value						
	Person to Whom You Gave the Gift and Address:									
14.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or co	otcy, did you give any gifts or contributions with a tota	l value of more than	\$600 to any charity?						
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Dates you contributed	Value						
Pa	rt 6: List Certain Losses									
15.	Within 1 year before you filed for bankrup or gambling? No Yes. Fill in the details.	tcy or since you filed for bankruptcy, did you lose anyt	hing because of thef	t, fire, other disaster,						
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost						
Pa	rt 7: List Certain Payments or Transfers	, ,								
16.	consulted about seeking bankruptcy or pr	tcy, did you or anyone else acting on your behalf pay of eparing a bankruptcy petition? eparers, or credit counseling agencies for services required		rty to anyone you						
	Yes. Fill in the details.									
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	Description and value of any property transferred	Date payment or transfer was made	Amount of payment						
	Tom Bible Law 6918 Shallowford Road, Suite 100 Chattanooga, TN 37421 tom@tombiblelaw.com or melinda@tombiblelaw.com	Attorney Fees-Prior case 19-12215	10/31/19							
	Ch 13 Trustee	Trustee fees in prior case 19-12215	7/10/19	\$14.74						
17.		tcy, did you or anyone else acting on your behalf pay of tors or to make payments to your creditors? You listed on line 16.	or transfer any proper	rty to anyone who						
	Yes. Fill in the details.									
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment						

Debtor 1 Peggy Annette Willbanks

18.	 Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. 								
	Person Who Received Transfer Address	Description and va			any property or received or debts change	Date transfer was made			
	Person's relationship to you								
19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-protein No		y property to a s	self-settled tr	ust or similar device o	f which you are a			
	Yes. Fill in the details.								
	Name of trust	Description and va	alue of the prop	erty transferr	ed	Date Transfer was made			
Par	List of Certain Financial Accounts, Insti	ruments, Safe Deposit	Boxes, and Sto	rage Units					
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No Yes. Fill in the details.	other financial accoun	ts; certificates	of deposit; sl					
		Last 4 digits of	Type of account or Date account wa			Last balance			
		account number			osed, sold, oved, or insferred	before closing or transfer			
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?								
	■ No								
	Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acco Address (Number, St State and ZIP Code)		Describe the contents		Do you still have it?			
22.	Have you stored property in a storage unit or	place other than your	home within 1 y	ear before y	ou filed for bankruptcy	/?			
	■ No								
	Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, State and ZIP Code)		Describe the	contents	Do you still have it?			
Par	t 9: Identify Property You Hold or Control fo	or Someone Else							
Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, for someone.					or, or hold in trust				
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prope (Number, Street, City, St Code)			property	Value			
Par	t 10: Give Details About Environmental Infor	mation							

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Debtor 1 Peggy Annette Willbanks

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Name Address (Number, Street, City, State and ZIP Code) A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of at limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No, None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. State shades Name Nam		haz	ardous material, pollutant, contaminant,	or similar term.							
No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Name Address (Number, Street, City, State and ZIP Code) A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No, None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. State State Street, City, State and ZIP Code) No, None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. State Street, City, State and ZIP Code) No Yes. Fill in the details below.	Rep	ort a	II notices, releases, and proceedings that	at you know about, regardless of wher	the	ey occurred.					
Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and	24.	24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?									
Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and			No								
Address (Number, Street, City, State and ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? No											
No Yes. Fill in the details. Name of site				Address (Number, Street, City, State and	d		Date of notice				
Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Case Number Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Case Name Nam	25.	Hav	re you notified any governmental unit of	any release of hazardous material?							
Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 7: Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any busines A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Do not include Social Security number of Dates business existed No Yes. Fill in the details below.			1.7								
No Yes. Fill in the details. Case Title Case Number Raddress (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Nature of the case Status case Status case Status case Status case Nature of the case Status case Status case Status case Status case Status case Status case Name Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details below.				Address (Number, Street, City, State and	d	and the second s	Date of notice				
Court or agency Name Address (Number, Street, City, Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code)	26.	Hav	re you been a party in any judicial or adn	ninistrative proceeding under any envi	ronn	mental law? Include settlements a	nd orders.				
Case Number Name Address (Number, Street, City, State and ZIP Code)											
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed No Yes. Fill in the details below.				Name Address (Number, Street, City,	Nat	ture of the case	Status of the case				
☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation ☐ No. None of the above applies. Go to Part 12. ☐ Yes. Check all that apply above and fill in the details below for each business. Business Name Describe the nature of the business Address Name of accountant or bookkeeper Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fininstitutions, creditors, or other parties. No Yes. Fill in the details below.	Par	t 11:	Give Details About Your Business or	Connections to Any Business							
☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation ☐ No. None of the above applies. Go to Part 12. ☐ Yes. Check all that apply above and fill in the details below for each business. Business Name Describe the nature of the business Address Name of accountant or bookkeeper Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fininstitutions, creditors, or other parties. No Yes. Fill in the details below.	27.	Wit	hin 4 vears before vou filed for bankrupt	cv. did vou own a business or have an	v of	the following connections to any	business?				
□ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed											
□ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fininstitutions, creditors, or other parties. ■ No □ Yes. Fill in the details below.			☐ A member of a limited liability comp	any (LLC) or limited liability partnersh	ip (L	.LP)					
□ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fininstitutions, creditors, or other parties. No □ Yes. Fill in the details below.											
No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fininstitutions, creditors, or other parties. No Yes. Fill in the details below.			☐ An officer, director, or managing exc	ecutive of a corporation							
No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fininstitutions, creditors, or other parties. No Yes. Fill in the details below.			☐ An owner of at least 5% of the voting	g or equity securities of a corporation							
Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fininstitutions, creditors, or other parties. No Yes. Fill in the details below.			No. None of the above applies. Go to F	Part 12.							
Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fininstitutions, creditors, or other parties. No Yes. Fill in the details below.					s.						
Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fin institutions, creditors, or other parties. No Yes. Fill in the details below.				Describe the nature of the business							
 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fin institutions, creditors, or other parties. ■ No □ Yes. Fill in the details below. 				Name of accountant or bookkeeper		Do not include Social Security number or ITIN.					
Yes. Fill in the details below.	28.			cy, did you give a financial statement t	to an		de all financial				
			No								
Name Date Issued											
Address (Number, Street, City, State and ZIP Code)		Ad	dress	Date Issued							

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Part 1	2: Sign Below		
are tru with a	e and correct. I understand that making	Financial Affairs and any attachments, and I declar a false statement, concealing property, or obtain o \$250,000, or imprisonment for up to 20 years, o	ning money or property by fraud in connection
/s/ Pe	eggy Annette Willbanks		
Peggy Annette Willbanks Signature of Debtor 1		Signature of Debtor 2	
Date	November 13, 2019	Date	
Did yo	u attach additional pages to Your Stater	ment of Financial Affairs for Individuals Filing for	Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did yo	u pay or agree to pay someone who is n	ot an attorney to help you fill out bankruptcy for	ms?
■ No			
☐ Yes	. Name of Person Attach the Bank	ruptcy Petition Preparer's Notice, Declaration, and S	Signature (Official Form 119).

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Fill i	n this information to identify your case	:			
Debt					
Debt	First Name	Middle Name	Last Name		
	se if, filing) First Name	Middle Name	Last Name		
Unite	ed States Bankruptcy Court for the: EA	ASTERN DISTRICT O	FTENNESSEE		
Case	e number				
(if kno				_	ck if this is an Inded filing
				anie	nided ming
∩ff	icial Form 106Sum				
		l Liabilities ar	nd Certain Statistical Information		12/15
Be as	complete and accurate as possible. If	two married people	are filing together, both are equally responsible for		ing correct
	nation. Fill out all of your schedules fir original forms, you must fill out a new		e information on this form. If you are filing amend the box at the top of this page.	ed sched	lules after you file
Part	1: Summarize Your Assets				
				Your	assets
					of what you own
1.	Schedule A/B: Property (Official Form			\$	0.00
	•			Ψ_	
				\$	5,976.00
	1c. Copy line 63, Total of all property on	Schedule A/B		\$	5,976.00
Part	2: Summarize Your Liabilities				
					liabilities int you owe
2.	Schedule D: Creditors Who Have Claims 2a. Copy the total you listed in Column A		(Official Form 106D) the bottom of the last page of Part 1 of Schedule D	\$	14,590.22
3.	Schedule E/F: Creditors Who Have Unse 3a. Copy the total claims from Part 1 (pr		I Form 106E/F) is) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the total claims from Part 2 (no	onpriority unsecured c	laims) from line 6j of Schedule E/F	\$	16,160.61
			Your total liabilities	\$	30,750.83
Part	3: Summarize Your Income and Exp	enses		1	
4.	Schedule I: Your Income (Official Form 1 Copy your combined monthly income fro		<i>1</i>	\$	1,911.04
5.	Schedule J: Your Expenses (Official For Copy your monthly expenses from line 2:			\$	1,477.00
Part	4: Answer These Questions for Adn	ninistrative and Stati	stical Records		
6.	Are you filing for bankruptcy under Cl ☐ No. You have nothing to report on the control of the	•	heck this box and submit this form to the court with yo	ur other s	chedules.
7.	■ Yes What kind of debt do you have?				
	■ Your debts are primarily consum	er debts. Consumer (debts are those "incurred by an individual primarily for	a persona	al. family, or

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Peggy Annette Willbanks

Page 16 of 54 Case number (if known)

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

578.32 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Ous	1.10 BK 14027 OD1	Main Document Page 17 of 54	<u> </u> 	.00.00	D 000
Fill in this	s info	rmation to identify your case	and this filing:			
Debtor 1		Peggy Annette Willbar				
Debtor 2		First Name	Middle Name Last Name			
(Spouse, if fil	ling)	First Name	Middle Name Last Name			
United Sta	ates E	Bankruptcy Court for the: _EAS	TERN DISTRICT OF TENNESSEE			
Case num	nber					Check if this is an
						amended filing
Officia	al F	orm 106A/B				
		le A/B: Propert	V			12/15
n each cat	egory,	, separately list and describe items	s. List an asset only once. If an asset fits in more than on			category where you
	n. If mo	ore space is needed, attach a sepa	possible. If two married people are filing together, both an arate sheet to this form. On the top of any additional page			
Part 1: D	escrib	e Each Residence, Building, Land	, or Other Real Estate You Own or Have an Interest In			
 1. Do you o	own o	r have any legal or equitable intere	est in any residence, building, land, or similar property?			
■ No. G) - 4 - D					
_		art 2. e is the property?				
L Tes.	WIICIG	e is the property :				
Dort 2: D	!	ya Vaya Vahialaa				
Part 2: D	escrib	e Your Vehicles				
			e interest in any vehicles, whether they are register o report it on Schedule G: Executory Contracts and Ur		any vehicl	es you own that
		•	·	icxpired Leases.		
3. Cars, v	ans,	trucks, tractors, sport utility v	ehicles, motorcycles			
☐ No						
Yes						
		Honda		Do not deduct secu	red claims	or exemptions. Put
3.1 Ma	ke: del:	Accord	Who has an interest in the property? Check one	the amount of any	secured cla	ims on Schedule D: ecured by Property.
Yea		2008	■ Debtor 1 only □ Debtor 2 only	Current value of the		irrent value of the
		ate mileage: 140k	Debtor 1 and Debtor 2 only	entire property?		rtion you own?
Oth	ner info	ormation:	\square At least one of the debtors and another			
			☐ Check if this is community property (see instructions)	\$4,906	.00	\$4,906.00
			nd other recreational vehicles, other vehicles, and			
Example	es: Bo	oats, trailers, motors, personal w	atercraft, fishing vessels, snowmobiles, motorcycle ac	cessories		
■ No						
☐ Yes						
5 Add th	ne dol	llar value of the portion you o	wn for all of your entries from Part 2, including any	entries for		
			that number here			\$4,906.00
Dowt 2 - 5	"	Value Danage and and the control of	4000	L		
		e Your Personal and Household I r have any legal or equitable it	tems nterest in any of the following items?		Curr	ent value of the
, , ,	3	,	,		porti	ion you own?
						ot deduct secured as or exemptions.

Official Form 106A/B Schedule A/B: Property page 1

Case 1:19-bk-14827-SDR Doc 1 Filed 11/13/19 Entered 11/13/19 14:35:55 Page 18 of 54 Case number (if known) Main Document Debtor 1 **Peggy Annette Willbanks** 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... \$1,000.00 **Bedroom Suite** 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No ■ Yes. Describe..... \$20.00 smart phone 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$50.00 Clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe.....

13. Non-farm animals

Examples: Dogs, cats, birds, horses

■ No

☐ Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

No

☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$1.070.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own? Do not deduct secured

Doc 1 Filed 11/13/19 Entered 11/13/19 14:35:55 Case 1:19-bk-14827-SDR Page 19 of 54 Main Document Case number (if known) Debtor 1 **Peggy Annette Willbanks** claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... **Prepaid Card Chase Staffing** \$0.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them...

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Issuer name and description.

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

■ No ☐ Yes. Give specific information about them...

No

No

☐ Yes.....

☐ Yes.....

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

Doc 1 Filed 11/13/19 Entered 11/13/19 14:35:55 Case 1:19-bk-14827-SDR Main Document Page 20 of 54 ase number (if known) Debtor 1 **Peggy Annette Willbanks** 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ■ No ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ☐ No Yes. Give specific information.. Personal Injury Lawsuit against Leigh A Goebel Docket 19C496 Unknown w/ Andrew Herring @ Wettermark Keith 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim.......

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

No

☐ Yes. Describe each claim.......

35. Any financial assets you did not already list

■ No

☐ Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$0.00

Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

page 4

Case 1:19-bk-14827-SDR Doc 1 Filed 11/13/19 Entered 11/13/19 14:35:55 Page 21 of 54 Case number (if known) Main Document Debtor 1 **Peggy Annette Willbanks** 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00

Par	List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$0.00
56.	Part 2: Total vehicles, line 5		\$4,906.00		
57.	Part 3: Total personal and household items, line 15		\$1,070.00		
58.	Part 4: Total financial assets, line 36		\$0.00		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61		\$5,976.00	Copy personal property total	\$5,976.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62	2			\$5,976.00

Official Form 106A/B Schedule A/B: Property page 5

		Main Docu	ment Page 22	01.54	
Fill in this infor	mation to identify your	case:			
Debtor 1	Peggy Annette W	/illbanks			
	First Name	Middle Name	Last Name	-	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F TENNESSEE		
Case number _					☐ Check if this is an
,					amended filing
					3

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property			Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
smart phone Line from Schedule A/B: 7.1	\$20.00		\$20.00	Tenn. Code Ann. § 26-2-103
			100% of fair market value, up to any applicable statutory limit	
Clothing Line from Schedule A/B: 11.1	\$50.00		\$50.00	Tenn. Code Ann. § 26-2-104
Line noin ochedale AVB. 11.1			100% of fair market value, up to any applicable statutory limit	
Prepaid Card: Chase Staffing Line from Schedule A/B: 17.1	\$0.00		\$0.00	Tenn. Code Ann. § 26-2-103
Line from Schedule AVB. 11.1			100% of fair market value, up to any applicable statutory limit	
Personal Injury Lawsuit against Leigh A Goebel Docket 19C496	Unknown		\$7,500.00	Tenn. Code Ann. § 26-2-111(2)(B)
w/ Andrew Herring @ Wettermark Keith Line from Schedule A/B: 30.1			100% of fair market value, up to any applicable statutory limit	20-2-111(2)(D)

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00	0.00.	<u> </u>	ggy Annette Willbanks	odoo nambor (ii kilowii)	
3.		•	claiming a homestead exemption of more than \$170,350? o adjustment on 4/01/22 and every 3 years after that for cases filed on or a	fter the date of adjustment.)	
		No			
		Yes.	Did you acquire the property covered by the exemption within 1,215 days	before you filed this case?	
			No		
			Yes		

Official Form 106C

		Main Document	Pag	e 24 of 54	_	
Fill in this informat	ion to identify you	r case:				
Debtor 1	Paggy Appatta V	Willhanks	<u>.</u>			
_	Peggy Annette V		Last Name			
Debtor 2						
_	First Name	Middle Name	Last Name			
United States Bankr	untov Court for the:	EASTERN DISTRICT OF TENNE	SSEE			
Officed States Darki	upicy Court for the.	EASTERN DISTRICT OF TERRE	.55LL			
Case number						
(if known)					☐ Check	cif this is an
					amen	ded filing
~						
Official Form 1	106D					
Schedule D	: Creditors	Who Have Claims S	ecure	ed by Property		12/15
		f two married people are filing together, out, number the entries, and attach it to				
number (if known).	dullional Fage, illi it o	dit, number the entries, and attach it to	uns ioini.	On the top of any additiona	i pages, write your na	ille allu case
1. Do any creditors hav	ve claims secured by	your property?				
_ `	_	is form to the court with your other so	hadulas '	You have nothing else to	report on this form	
_		•	incadics.	Tou have nothing clac to	report on this form.	
Yes. Fill in all	of the information b	pelow.				
Part 1: List All S	ecured Claims					
2. List all secured clai	ims. If a creditor has n	nore than one secured claim, list the credit	or separate	ely Column A	Column B	Column C
		a particular claim, list the other creditors in	n Part 2. As		Value of collateral	Unsecured
much as possible, list ti	ne ciaims in aipnabetic	al order according to the creditor's name.			that supports this claim	portion If any
2.1 Aaron's		Describe the property that secures the	claim:	\$2,000.00	\$1,000.00	\$1,000.00
Creditor's Name		Bedroom Suite				
120 North Co	edar Avenue	As of the date you file, the claim is: Ch	ank all that			
South Pittsb	ourg, TN	apply.	CON All triat			
37380		☐ Contingent				
Number, Street, City	y, State & Zip Code	☐ Unliquidated				
		Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		An agreement you made (such as mo	rtgage or s	ecured		
Debtor 2 only		car loan)				
☐ Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mecha	anic's lien)			
☐ At least one of the o	debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim	relates to a	Other (including a right to offset)				
community debt						
Date debt was incurre	ed	Last 4 digits of account number	r			
Independent	t Dealers					
Advantage		Describe the property that secures the	claim:	\$12,590.22	\$4,906.00	\$7,684.22
Creditor's Name		2008 Honda Accord 140k mile	S			
	Highway Bldg	As of the date you file, the claim is: Ch	eck all that			
C-100	A 20024	apply.				
Suwanee, G		Contingent				
Number, Street, City	y, State & Zip Code	Unliquidated				
Who ower the debt	Chaok ana	Disputed				
Who owes the debt?	r Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mo car loan)	rtgage or s	ecured		
Debtor 2 only		_				
Debtor 1 and Debto	•	Statutory lien (such as tax lien, mecha	anic's lien)			
At least one of the o		Judgment lien from a lawsuit				
Check if this claim	relates to a	Other (including a right to offset)				
community debt						
Date debt was incurre	ed	Last 4 digits of account number	r			

Case 1:19-bk-14827-SDR Doc 1 Filed 11/13/19 Entered 11/13/19 14:35:55 Desc Page 25 of 54 Main Document

Debtor 1	Peggy Annette Willbanks			Case number (if known)	
	First Name	Middle Name	Last Name	-	
Add the	dollar value of yo	ur entries in Column A on t	his page. Write that number here:	\$14,590.22	2
	the last page of y at number here:	our form, add the dollar va	lue totals from all pages.	\$14,590.22	2

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

C	ase 1.13-bk-14021-		e 26 of 54	33 Desc
Fill in this	information to identify your		- 70 (II .)4	
Debtor 1	Peggy Annette W	lhanks		
Dobio. 1	First Name	Middle Name Last Name		
Debtor 2	T AN			
(Spouse if, filing	g) First Name	Middle Name Last Name		
United State	es Bankruptcy Court for the:	EASTERN DISTRICT OF TENNESSEE		
Case numb	er			
(if known)			_	Check if this is an
			a	amended filing
Official F	Form 106E/F			
		no Have Unsecured Claims		12/15
		Part 1 for creditors with PRIORITY claims and	Part 2 for creditors with NONPPIORITY claim	
Schedule D: (left. Attach the name and case)	Creditors Who Have Claims Sec ne Continuation Page to this pag se number (if known).	ed Leases (Official Form 106G). Do not include red by Property. If more space is needed, copy . If you have no information to report in a Part,	the Part you need, fill it out, number the en	tries in the boxes on the
	ist All of Your PRIORITY Un			
	creditors have priority unsecure	claims against you?		
	Go to Part 2.			
☐ Yes.				
Part 2:	ist All of Your NONPRIORIT	/ Uneacured Claims		
	creditors have nonpriority unsec			
		•		
□ No. Y	ou have nothing to report in this page	rt. Submit this form to the court with your other sch	adules.	
Yes.				
unsecure	ed claim, list the creditor separately	ims in the alphabetical order of the creditor who for each claim. For each claim listed, identify what t the other creditors in Part 3.If you have more than	type of claim it is. Do not list claims already inc	cluded in Part 1. If more
				Total claim
4.1 As	pen Dental	Last 4 digits of account number	4374	\$103.61
Nor PO	priority Creditor's Name Box 3126	When was the debt incurred?		
	racuse, NY 13220 nber Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	o incurred the debt? Check one.	As of the date you me, the claim	13. Officer all triat apply	
_	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
_	Debtor 1 and Debtor 2 only	☐ Disputed		
_	At least one of the debtors and and	_ '	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a comm			
deb			aration agreement or divorce that you did not	
is ti	•	☐ Debts to pension or profit-sharir	ng plans, and other similar debts	
П.	res	Other. Specify		_

Debtor 1 Peggy Annette Willbanks

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Case number (if known)

4.2	Chattanooga Emergency Med PLLC	Last 4 digits of account number 7551	\$714.00
	Nonpriority Creditor's Name		
	PO Box 94274 Oklahoma City, OK 73143-4274	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	lacksquare Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	Courtesy Finance of TN, LLC.	Last 4 digits of account number 1183	\$2,104.39
	Nonpriority Creditor's Name		
	P.O. Box 501229	When was the debt incurred?	
	Atlanta, GA 31150 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.4	Heron Emergency Phys, PLLC	Last 4 digits of account number 3417	\$80.32
	Nonpriority Creditor's Name	<u></u>	
	PO Box 38002	When was the debt incurred?	
	Philadelphia, PA 19101 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	The state year may and chammed enjoying and apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	

Debtor 1 Peggy Annette Willbanks

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Case number (if known)

4.5	Heron Emergency Phys, PLLC Nonpriority Creditor's Name	Last 4 digits of account number 5959	\$152.39	
	PO Box 38002 Philadelphia, PA 19101	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify		
4.6	Heron Emergency Phys, PLLC Nonpriority Creditor's Name	Last 4 digits of account number 4782	\$970.00	
	PO Box 38002 Philadelphia, PA 19101	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	Other. Specify		
4.7	Medical Data Systems Inc	Last 4 digits of account number 9731	\$175.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Dept 2001 9th Ave Ste 312 Vero Beach, FL 32960	When was the debt incurred? Opened 12/17		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	■ Other. Specify Tennova Medical Center Of Clev		
	03	- Other, Specify		

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Case number (if known) Main Document Debtor 1 Peggy Annette Willbanks 4.8 \$154.00 Medical Data Systems Inc Last 4 digits of account number 3498 Nonpriority Creditor's Name Attn: Bankruptcy Dept When was the debt incurred? **Opened 11/17** 2001 9th Ave Ste 312 Vero Beach, FL 32960 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Tennova Medical Center Of Clev ☐ Yes **Nationwide Recovery** 4.9 Last 4 digits of account number 8250 \$1,070.00 Nonpriority Creditor's Name 501 Shellev Dr Ste 300 When was the debt incurred? Opened 2/12/19 Tyler, TX 75701 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other. Specify 4.1 NPAS, Inc. 4521 \$664.60 Last 4 digits of account number 0 Nonpriority Creditor's Name PO Box 99400 When was the debt incurred? Louisville, KY 40269 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No
□ Yes

Other. Specify

☐ Debts to pension or profit-sharing plans, and other similar debts

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Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Assoc In Diagnostic Radiology ☐ Yes

Case 1:19-bk-14827-SDR Doc 1 Filed 11/13/19 Entered 11/13/19 14:35:55 Page 31 of 54 Case number (if known) Main Document Debtor 1 Peggy Annette Willbanks 4.1 \$188.00 **Online Collections** 1362 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy **Opened 11/18** When was the debt incurred? Po Box 1489 Winterville, NC 28590 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Assoc In Diagnostic Radiology ☐ Yes 4.1 Parkridge West Hospital \$820.95 Last 4 digits of account number 5 Nonpriority Creditor's Name **Resurgent Capital Services** When was the debt incurred? PO Box 1927 Greenville, SC 29602 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1

Parkridge West Hospital	Last 4 digits of account number			
Nonpriority Creditor's Name Resurgent Capital Services	When was the debt incurred?			
PO Box 1927	Their was the dest meaned.			
Greenville, SC 29602				
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.				
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims			
■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
□Yes	Other Specify			

6

\$792.90

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4.1 7	Parkridge West Hospital	Last 4 digits of account number	\$1,005.32	
	Nonpriority Creditor's Name Resurgent Capital Services PO Box 1927	When was the debt incurred?		
	Greenville, SC 29602 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify		
4.1	Parkridge West Hospital	Last 4 digits of account number	\$175.00	
	Nonpriority Creditor's Name Resurgent Capital Services PO Box 1927	When was the debt incurred?		
	Greenville, SC 29602 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify		
4.1 9	Parkridge West Hospital	Last 4 digits of account number	\$185.73	
	Nonpriority Creditor's Name Resurgent Capital Services PO Box 1927	When was the debt incurred?		
	Greenville, SC 29602 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	Other. Specify		

Page 33 of 54 Main Document Debtor 1 Peggy Annette Willbanks se number (if known) 4.2 \$1,294.00 Parkridge West Hospital Last 4 digits of account number 0 Nonpriority Creditor's Name **Resurgent Capital Services** When was the debt incurred? PO Box 1927 Greenville, SC 29602 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.2 **PathGroup** 1087 \$21.79 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 740858 When was the debt incurred? Cincinnati, OH 45274-0858 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.2 Pendrick Capital Partners II LLC \$2,154.00 2 Last 4 digits of account number Nonpriority Creditor's Name c/o Peritus Portfolio Svcs When was the debt incurred? PO Box 141419 Irving, TX 75014 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent

Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

Debtor 1 Peggy Annette Willbanks

Main Document Page 34 of 54

Case number (if known)

4.2 3	Quantum3 Group LLC	Last 4 digits of account number	\$1,070.00	
	Nonpriority Creditor's Name As Agent for Cascade Capital LLC Series1 PO Box 788 Kirkland, WA 98083	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify		
4.2 4	Radiology Alliance	Last 4 digits of account number 5062	\$16.30	
	Nonpriority Creditor's Name PO Box 88087	When was the debt incurred?		
	Chicago, IL 60680	when was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	□ Yes	Other. Specify Other. Specify		
4.2 5	Skin Cancer & Cosmetic Dermatology Nonpriority Creditor's Name	Last 4 digits of account number 2070	\$59.31	
	136 Battlefield Crossing Court Ringgold, GA 30736	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	□ Yes	_		
	— 163	Other. Specify		

Page 35 of 54 Case number (if known) Main Document Debtor 1 Peggy Annette Willbanks 4.2 \$147.00 Southern Cash 0022 Last 4 digits of account number 6 Nonpriority Creditor's Name 2201 Gault Ave N When was the debt incurred? 3-18-13 Fort Payne, AL 35967 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.2 **Sun Loan Company** Unknown Last 4 digits of account number Nonpriority Creditor's Name 1801 Gault Ave N ste 104 When was the debt incurred? Fort Payne, AL 35967 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify ex-hubands, co-signer only ☐ Yes 4.2 Transworld Svs Inc/33 4945 \$970.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Attn: Compliance Dept When was the debt incurred? **Opened 07/18** Po Box 15618 Wilmington, DE 19850 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated

Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Heron Emergency Phys Plic ☐ Yes

Debtor	Peggy Annette Willbanks	Main Document	Page	e 36 of 54 Case number (if known)	
4.2 9	World Acceptance/Finance Corp	Last 4 digits of accoun	t number	1301	\$420.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 6429	When was the debt inco		Opened 11/12 Last Active 5/22/13	
	Greenville, SC 29606 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file,	the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	■ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY	unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?		ut of a sepa	ration agreement or divorce that you did not	
	■ No		rofit-sharin	g plans, and other similar debts	
	Yes	Other. Specify in e	ex husba	ands name, co signer only	_
Part 3:	List Others to Be Notified About a D	eht That You Already Liste	d		
is tryi have notifi	his page only if you have others to be notified ing to collect from you for a debt you owe to more than one creditor for any of the debts to ed for any debts in Parts 1 or 2, do not fill our and Address	someone else, list the original hat you listed in Parts 1 or 2, lis	creditor in st the addi	Parts 1 or 2, then list the collection agend tional creditors here. If you do not have ac	cy here. Similarly, if you
_	n Dental	Line 4.1 of (Check one):		Part 1: Creditors with Priority Unsecured Cla	aims
_	ox 1578			Part 2: Creditors with Nonpriority Unsecured	
Alban	ny, NY 12201	Last 4 digits of account numbe		. ,	
Name a	and Address	On which entry in Part 1 or Par	rt 2 did vou	list the original creditor?	
	ciates In Diagnostic Radiology	Line 4.11 of (Check one):		Part 1: Creditors with Priority Unsecured Cla	aims
_	Box 3145			Part 2: Creditors with Nonpriority Unsecured	d Claims
indiar	napolis, IN 46206-3145	Last 4 digits of account numbe	er		
Namo	and Address	On which entry in Part 1 or Par	rt 2 did vou	list the original creditor?	
	ciates in Diagnostic Radiology	Line 4.12 of (<i>Check one</i>):		Part 1: Creditors with Priority Unsecured Cla	aims
	Gunbarrel Rd			Part 2: Creditors with Nonpriority Unsecured	
Chattanooga, TN 37421		Last 4 digits of account numbe			
Name a	and Address	On which entry in Part 1 or Par	rt 2 did you	list the original creditor?	
	ade Capital	Line 4.23 of (Check one):		Part 1: Creditors with Priority Unsecured Cla	aims
	Corporate Cir Ste 202 uma, CA 94954	Last 4 digits of account number		Part 2: Creditors with Nonpriority Unsecured	d Claims
		Last 4 digits of account numbe	; i		
	and Address	On which entry in Part 1 or Par	-		
	n Emergency Physicians ' Noel Road, Suite 1600	Line 4.28 of (Check one):		Part 1: Creditors with Priority Unsecured Cla	
	s, TX 75240			Part 2: Creditors with Nonpriority Unsecured	1 Claims
		Last 4 digits of account numbe	er		
	and Address	On which entry in Part 1 or Par			
	eld & Lester Box 789	Line 4.3 of (Check one):		Part 1: Creditors with Priority Unsecured Cla	
L				Part 2: Creditors with Monoriority Unsecured	1 Claime

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Medical Data Systems Inc 645 Walnut St Ste 5 Gadsden, AL 35901

Chattanooga, TN 37401

Line 4.7 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Name and Address Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Case 1:19-bk-14827-SDR Doc 1 Filed 11/13/19 Entered 11/13/19 14:35:55 Main Document Page 37 of 54 se number (if known) Debtor 1 Peggy Annette Willbanks Medical Data Systems Inc Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 645 Walnut St Ste 5 ■ Part 2: Creditors with Nonpriority Unsecured Claims Gadsden, AL 35901 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Nationwide Recovery Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 3000 Kellway Dr ■ Part 2: Creditors with Nonpriority Unsecured Claims Carrollton, TX 75006 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Online Collections** Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Pob 1489 Part 2: Creditors with Nonpriority Unsecured Claims Winterville, NC 28590 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Online Collections** Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Pob 1489 Part 2: Creditors with Nonpriority Unsecured Claims Winterville, NC 28590 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Online Collections** Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Pob 1489 ■ Part 2: Creditors with Nonpriority Unsecured Claims Winterville, NC 28590 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Online Collections** Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Pob 1489 ■ Part 2: Creditors with Nonpriority Unsecured Claims Winterville, NC 28590 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Parkridge Medical Center Line **4.15** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 941 Spring Creek Rd ■ Part 2: Creditors with Nonpriority Unsecured Claims Chattanooga, TN 37412 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Pendrick Capital Partners LLC Line 4.22 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 727 Washington Street ■ Part 2: Creditors with Nonpriority Unsecured Claims Key West, FL 33040 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Quantum3 Group LLC** Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims As Agent for Cascade Capital LLC Part 2: Creditors with Nonpriority Unsecured Claims Series PO Box 788 Kirkland, WA 98083 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Tennova Medical Center Of Clevland** Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 2305 Chambliss Avenue, NW ■ Part 2: Creditors with Nonpriority Unsecured Claims Cleveland, TN 37311 Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.28 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?

World Acceptance/Finance Corp Line 4.29 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 108 Frederick St

Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address

Pob 15609

Transworld Sys Inc/33

Wilmington, DE 19850

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Debtor 1 Peggy Annette Willbanks

Greenville, SC 29607

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 16,160.61
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 16,160.61

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		IVICIII I AUGU	IIIEII – FAUE 33 UI	.)4
Fill in this infor	rmation to identify your	case:		
Debtor 1	Peggy Annette W	/illbanks		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT C	OF TENNESSEE	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Aaron's
120 North Cedar Avenue
South Pittsburg, TN 37380

State what the contract or lease is for
\$315.00/month for bedroom suite

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		Main Docu	ment Page 40 of 54	
Fill in th	nis information to identify your	case:		
Debtor 1	· • 99) / ·····•			
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if,		Middle Name	Last Name	
United S	States Bankruptcy Court for the:	EASTERN DISTRICT O	F TENNESSEE	
Case nu (if known)	imber			☐ Check if this is an amended filing
Offici	al Form 106H			
	dule H: Your Cod	lebtors		12/15
eople a ill it out, our nan	re filing together, both are equ , and number the entries in the ne and case number (if known	ally responsible for supperboxes on the left. Attach). Answer every question	olying correct information. If mo the Additional Page to this page	te and accurate as possible. If two married re space is needed, copy the Additional Page, te. On the top of any Additional Pages, write
		you are ming a joint oace, t	do not not ounor opodoo do d oodo	
□ N ■ Y				
■ Y	es			
			operty state or territory? (Comn erto Rico, Texas, Washington, and	nunity property states and territories include d Wisconsin.)
■ N	Io. Go to line 3.			
ПΥ	es. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?	
in liı Forr	ne 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make sure you	pouse is filing with you. List the person shown have listed the creditor on Schedule D (Official Schedule D, Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		mn 2: The creditor to whom you owe the debt k all schedules that apply:
3.1	Michael Willbanks		□ So	chedule D, line
				chedule E/F, line 4.29
	ex-husbands			chedule G
			Worl	d Acceptance/Finance Corp
2.0	Michael Willhamba		.	shookida D. Kara
3.2	Michael Willbanks			chedule D, line
	ex-husband			chedule E/F, line 4.27 chedule G
				Loan Company

E:II	in this information to identify your	2000							
	in this information to identify your of btor 1 Peggy Annotation	ette Willbanks							
	btor 2 buse, if filing)				_				
Uni	ited States Bankruptcy Court for the	e: EASTERN DISTRICT	OF TENNESSEE		_				
	se number nown)		-			Check if this is: An amende A supplement	nt showing		chapter
0	fficial Form 106I					13 income a		lowing date.	
_	chedule I: Your Inc	ome				MM / DD/ Y	YYY		12/15
sup spo atta	as complete and accurate as pos plying correct information. If you use. If you are separated and yo ich a separate sheet to this form. The security of the se	are married and not filli ur spouse is not filing wi On the top of any addition	ng jointly, and your ith you, do not inclu	spouse i de inforn	s livi natio	ing with you, inclu on about your spo	ide informa use. If mor	ation about e space is r	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fili	ng spouse	
	If you have more than one job,	Employment status	■ Employed	■ Employed			☐ Employed		
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not er	nployed		
	employers.	Occupation	Fork Lift Operat	tor					
	Include part-time, seasonal, or self-employed work.	Employer's name	Tyler Staffing S Volkswagen	ervices	->				
	Occupation may include student or homemaker, if it applies.	Employer's address							
Pai	rt 2: Give Details About Mo	How long employed th	here? 2 week	s					
Esti	imate monthly income as of the cuse unless you are separated.		you have nothing to r	eport for a	any I	ine, write \$0 in the	space. Inclu	ude your nor	n-filing
	ou or your non-filing spouse have me space, attach a separate sheet to		ombine the informatio	n for all e	mplc	oyers for that perso	n on the line	es below. If y	ou need
						For Debtor 1	For Debt	or 2 or g spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	2,210.00	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ine 2 + line 3.		4.	\$	2,210.00	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

Deb	otor 1	Peggy Annette Willbanks	_	Case	number (if known)			
	0	vyline 4 hove	4	For	Debtor 1	non-	Debtor 2 or filing spouse	
	Cop	y line 4 here	4.	\$_	2,210.00	\$	N/A	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$_	168.96	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	N/A	
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d. 5e.	\$_ \$	0.00	\$	N/A N/A	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	N/A	
	5g.	Union dues	5g.	\$_	0.00	\$	N/A	
	5h.	Other deductions. Specify: AdminFee	5h.+	\$_		+ \$	N/A	
		BGR		\$	43.33	\$	N/A	
		DRG		\$_	13.00	\$	N/A	
		UNI		\$_	65.00	\$	N/A	
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	298.96	\$	N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	1,911.04	\$	N/A	
8.	8b. 8c.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8a. 8b. t 8c.	\$ \$ \$	0.00	\$ \$	N/A N/A	
	8d.	Unemployment compensation	8d.	\$_	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	
	8f. 8g. 8h.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify:	e 8f. 8g. 8h.+	\$_ \$_ \$_	0.00 0.00 0.00	\$ \$ + \$	N/A N/A N/A	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
-					0.00			
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	10. \$		1,911.04 + \$		N/A = \$	1,911.04
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, you er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	r depen	•			chedule J. 11. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certailies					12. \$	1,911.04
13.	Do	you expect an increase or decrease within the year after you file this form	ո?				monthly	
		No.						
		Yes. Explain:						

Official Form 106l Schedule I: Your Income page 2

Fill	in this inf <u>orma</u>	tion to identify yo	our case:					
Deb		Peggy Anne		anks		Che	ck if this is:	
Dah	tor 2						An amended filing	otan anna an aithean an an an an an
	tor 2 buse, if filing)						A supplement shown 13 expenses as of	ving postpetition chapter the following date:
Unit	ed States Bankr	uptcy Court for the	: EASTE	RN DISTRICT OF TENNE	SSEE		MM / DD / YYYY	
1	e number nown)							
Of	fficial Fo	rm 106J				•		
Sc	chedule	J: Your	Exper	nses				12/15
Be a	as complete a ormation. If m	and accurate as	possible eded, atta	. If two married people ar ch another sheet to this	e filing together, be form. On the top of	oth are equ f any additi	ally responsible fo onal pages, write y	or supplying correct your name and case
		ibe Your House	hold					
1.	Is this a join							
	■ No. Go to □ Yes. Doe		in a separ	ate household?				
	□ N							
	□ Ye	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Deb	otor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes
								□ No
3.	Do your ove	enses include	_					☐ Yes
Э.	expenses of	f people other t	han ┌	No Yes				
	yourself and	d your depende	nts? —	100				
exp	imate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
Incl	ude expense	s paid for with	non-cash	government assistance i	f you know			
	value of such ficial Form 10		d have inc	cluded it on Schedule I: \	our Income		Your exp	enses
4.		or home owners and any rent for th		ses for your residence. I	nclude first mortgag	e 4. \$	B	500.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. S	5	0.00
		rty, homeowner's	s, or renter	's insurance		4b. 9		0.00
				upkeep expenses		4c. §	·	0.00
5.		owner's associat		dominium dues our residence, such as ho	me equity loops	4d. § 5. §		0.00
J.	Auditional	norigage payiil	cinco non ye	our residence, such as no	me equity loans	J. 3	Y	0.00

Debtor 1	Peggy Annette Willbanks	Case number (if known)	
S. Uti	lities:		
6a.		6a. \$	150.00
6b.		6b. \$	20.00
6c.		6c. \$	0.00
6d.		6d. \$	70.00
	, ,		
	od and housekeeping supplies	7. \$	350.00
_	ildcare and children's education costs	8. \$	0.00
	othing, laundry, and dry cleaning	9. \$	0.00
0. Pe i	rsonal care products and services	10. \$	20.00
	dical and dental expenses	11. \$	40.00
	ansportation. Include gas, maintenance, bus or train fare.	12. \$	180.00
	not include car payments.	·	
	tertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
	aritable contributions and religious donations	14. \$	0.00
	surance.		
	not include insurance deducted from your pay or included in lines 4 or 20.	45- 0	_
	a. Life insurance	15a. \$	0.00
15b	o. Health insurance	15b. \$	0.00
150	c. Vehicle insurance	15c. \$	147.00
	d. Other insurance. Specify:	15d. \$	0.00
	xes. Do not include taxes deducted from your pay or included in lines 4 or 2		
	ecify:	16. \$	0.00
	stallment or lease payments:		
	a. Car payments for Vehicle 1	17a. \$	0.00
17t	o. Car payments for Vehicle 2	17b. \$	0.00
170	c. Other. Specify:	17c. \$	0.00
170	d. Other. Specify:	17d. \$	0.00
	ur payments of alimony, maintenance, and support that you did not re		0.00
	ducted from your pay on line 5, Schedule I, Your Income (Official Form		0.00
	her payments you make to support others who do not live with you.	\$	0.00
	ecify:	19.	
	her real property expenses not included in lines 4 or 5 of this form or o		
208	a. Mortgages on other property	20a. \$	0.00
20k	o. Real estate taxes	20b. \$	0.00
200	c. Property, homeowner's, or renter's insurance	20c. \$	0.00
200	d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
206	e. Homeowner's association or condominium dues	20e. \$	0.00
Otl	her: Specify:	21. +\$	0.00
. 0		Z1. 1¥	0.00
	Iculate your monthly expenses		
	a. Add lines 4 through 21.	\$	1,477.00
22k	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 1	06J-2 \$	
220	c. Add line 22a and 22b. The result is your monthly expenses.	\$	1,477.00
			,
	Iculate your monthly net income.	00 *	
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	1,911.04
23k	c. Copy your monthly expenses from line 22c above.	23b\$	1,477.00
	Out the state of the second of		
230	c. Subtract your monthly expenses from your monthly income.	23c. \$	434.04
	The result is your monthly net income.	200. μ	10 1104
4. Do	you expect an increase or decrease in your expenses within the year	after you file this form?	
	example, do you expect to finish paying for your car loan within the year or do you ex		ase or decrease because of
	dification to the terms of your mortgage?		
	No.		
	Yes. Explain here:		
_	100.		

Fill in this in	nformation to identify your	case:			
Debtor 1	Peggy Annette W	illbanks			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
(Spouse II, IIIIIIg)	i iist Name				
United State	s Bankruptcy Court for the:	EASTERN DISTRICT	OF TENNESSEE		
Case numbe	er				
(if known)					Check if this is an
					amended filing
Official F	orm 106Dec				
Declar	ation About a	ın Individua	I Debtor's So	hedules	12/15
obtaining mo years, or bot	oney or property by fraud in th. 18 U.S.C. §§ 152, 1341, 1	n connection with a bar			ement, concealing property, or 00, or imprisonment for up to 20
	Sign Below				
Did you	u pay or agree to pay some	one who is NOT an atte	orney to help you fill out b	pankruptcy forms?	
■ No)				
☐ Ye	es. Name of person				kruptcy Petition Preparer's Notice, , and Signature (Official Form 119)
	enalty of perjury, I declare y are true and correct.	that I have read the su	mmary and schedules file	d with this declaration	on and
X /s/	Peggy Annette Willbank	.s	X		
Peg	ggy Annette Willbanks nature of Debtor 1		Signature of	Debtor 2	
Sigi	nature of Debiol 1				
Date	e November 13, 2019		Date		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7	-	Liquidation
\$2	45	filing fee
\$	75	administrative fee
+ \$	15	trustee surcharge
\$3	35	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 1:19-bk-14827-SDR Doc 1 Filed 11/13/19 Entered 11/13/19 14:35:55 Desc Main Document Page 50 of 54

United States Bankruptcy Court Eastern District of Tennessee

In re	Peggy Annette Willbanks			
		Debtor(s)	Chapter	13

VERIFICATION OF CREDITOR MATRIX

The above Debtor(s) hereby verifies under the penalty of perjury under the laws of the United States of America that the attached list of creditors is true and correct to the best of his/her knowledge.

 Peggy Annette Willbanks 1987 Shellmound Road Jasper, TN 37347

Internal Revenue Service Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101-7346

Aaron's 120 North Cedar Avenue South Pittsburg, TN 37380

Aspen Dental PO Box 3126 Syracuse, NY 13220

Aspen Dental PO Box 1578 Albany, NY 12201

Associates In Diagnostic Radiology P.O. Box 3145 Indianapolis, IN 46206-3145

Associates in Diagnostic Radiology 1710 Gunbarrel Rd Chattanooga, TN 37421

Cascade Capital 1670 Corporate Cir Ste 202 Petaluma, CA 94954

Chattanooga Emergency Med PLLC PO Box 94274 Oklahoma City, OK 73143-4274

Courtesy Finance of TN, LLC. P.O. Box 501229 Atlanta, GA 31150

Heron Emergency Phys, PLLC PO Box 38002 Philadelphia, PA 19101

Heron Emergency Physicians 13737 Noel Road, Suite 1600 Dallas, TX 75240

Independent Dealers Advantage 780 Buford Highway Bldg C-100 Suwanee, GA 30024

Mayfield & Lester P.O. Box 789 Chattanooga, TN 37401

Medical Data Systems Inc Attn: Bankruptcy Dept 2001 9th Ave Ste 312 Vero Beach, FL 32960

Medical Data Systems Inc 645 Walnut St Ste 5 Gadsden, AL 35901

Nationwide Recovery 501 Shelley Dr Ste 300 Tyler, TX 75701

Nationwide Recovery 3000 Kellway Dr Carrollton, TX 75006

NPAS, Inc. PO Box 99400 Louisville, KY 40269

Online Collections Attn: Bankruptcy Po Box 1489 Winterville, NC 28590

Online Collections Pob 1489 Winterville, NC 28590

Parkridge Medical Center 941 Spring Creek Rd Chattanooga, TN 37412

Parkridge West Hospital Resurgent Capital Services PO Box 1927 Greenville, SC 29602

PathGroup P.O. Box 740858 Cincinnati, OH 45274-0858

Pendrick Capital Partners II LLC c/o Peritus Portfolio Svcs PO Box 141419 Irving, TX 75014

Pendrick Capital Partners LLC 727 Washington Street Key West, FL 33040

Quantum3 Group LLC As Agent for Cascade Capital LLC Series1 PO Box 788 Kirkland, WA 98083

Quantum3 Group LLC As Agent for Cascade Capital LLC Series PO Box 788 Kirkland, WA 98083

Radiology Alliance PO Box 88087 Chicago, IL 60680

Skin Cancer & Cosmetic Dermatology 136 Battlefield Crossing Court Ringgold, GA 30736

Southern Cash 2201 Gault Ave N Fort Payne, AL 35967

Sun Loan Company 1801 Gault Ave N ste 104 Fort Payne, AL 35967

Tennova Medical Center Of Clevland 2305 Chambliss Avenue, NW Cleveland, TN 37311

Transworld Sys Inc/33 Attn: Compliance Dept Po Box 15618 Wilmington, DE 19850

Transworld Sys Inc/33 Pob 15609 Wilmington, DE 19850

World Acceptance/Finance Corp Attn: Bankruptcy Po Box 6429 Greenville, SC 29606

World Acceptance/Finance Corp 108 Frederick St Greenville, SC 29607 Case 1:19-bk-14827-SDR Doc 1 Filed 11/13/19 Entered 11/13/19 14:35:55 Desc Main Document Page 54 of 54

B2830 (Form 2830) (4/19)

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF TENNESSEE

In re	Peggy Annette Willbanks	Case No.
		Debtor(s)
		CERTIFICATIONS REGARDING IGATIONS AND SECTION 522(q)
Part I.	Certification Regarding Domestic Support Obligat	ions (check no more than one)
	Pursuant to 11 U.S.C. Section 1328(a), I certify the	at:
	✓ I owed no domestic support obligation when pay any such obligation since then.	n I filed my bankruptcy petition, and I have not been required to
		c support obligation. I have paid all such amounts that my id all such amounts that became due between the filing of my
Part II.	If you checked the second box, you must provide the	he information below.
	My current address:	
	My current employer and my employer's address:	
Part III	Certification Regarding Section 522(q) (check no	more than one)
	Pursuant to 11 U.S.C. Section 1328(h), I certify the	at:
		o §522(b)(3) and state or local law (1) in property that I or a comestead, or acquired as a burial plot, as specified in e in the aggregate.
		rsuant to §522(b)(3) and state or local law (1) that I or a homestead, or acquired as a burial plot, as specified in the aggregate.
Part IV	. Debtor's Signature	
	I certify under penalty of perjury that the interest the best of my knowledge and belief.	formation provided in these certifications is true and correct to
	Executed on November 5, 2019	/s/ Peggy Annette Willbanks
	Date	Peggy Annette Willbanks
		Debtor